

Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Wimber : (850) 205-0383

From:

Account Name : HENDERSON, FRANKLIN, STARNES & HOLT, P.A

Account Number: 075410002172 Phone: (239)334-4121 Fax Number: (239)334-4100

LIMITED LIABILITY COMPANY

EBORA U.S.A., LLC

Certificate of Status	0
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SECRETARY OF STATE
IVISION OF CORPORATIONS

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ARTICLES OF ORGANIZATION OF EBORA U.S.A., LLC

ARTICLE I-NAME

The name of the limited liability company shall be EBORA U.S.A., LLC (the "Company").

ARTICLE ILMAILING AND STREET ADDRESS

The mailing and street address of the principal office of the Company is:

1342 Colonial Boulevard, Suite 27 Fort Myers, Florida 33907

ARTICLE III-EFFECTIVE DATE

This limited liability company's existence shall commence upon the filing of these Articles and shall terminate on December 31, 2054.

AHTICLE IV-INITIAL REGISTERED AGENT AND OFFICE

The name and street address of the initial registered agent of the Company is:

Name

<u>Address</u>

MARIANNE H. LOPERA

Bonita Bay Executive Center I 3461 Bonita Bay Boulevard, Suite 206 Bonita Springs, Florida 34134

ARTICLE V-PURPOSE

The Company shall have unlimited power to engage in and do any lawful act concerning any or all lawful businesses for which limited liability companies may be organized according to the laws of the State of Florida, including all powers and purposes now and hereafter permitted by law to a limited liability company.

ARTICLE VI-MANAGEMENT OF THE COMPANY

The Company shall be managed by not less than one (1) manager (the "Manager") and is, therefore, a manager-managed company. The following is the name

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and address of the initial Manager who shall serve as the Manager of the Company until his successor is elected and qualified:

Name

JAN VRABEL

Address

c/o M. Mosny 24330 Sandpiper Isle Way, Apt. 402D Bonita Springs, Florida 34134

ARTICLE VII-OPERATING AGREEMENT

The Members shall have the power to adopt, after, amend, or repeal the Operating Agreement of the Company containing provisions for the regulation and management of the affairs of the Company.

IN WITNESS WHEREOF, the undersigned, being an authorized representative of a Member of the Company, has executed these Articles of Organization, this 10 th day of May, 2004.

MARIANNE H. LePERA Authorized Representative

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE POLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT. IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: EBORA U.S.A., LLC.
- The name and address of the registered agent and office is:

Martanne H. LePera Bonita Bay Executive Center I 3451 Bonita Bay Boulevard, Suite 206 Bonita Springs, Florida 34134

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

MARIANNE H. LePERA, Registered Agent

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